

RESPONSE TO QUESTIONS
RFP# 305PUR-DHHRFP-WCSII3RD-MVA

1. **Section I. C. "Invitation to Propose," states that "...proposers must be a Quality Improvement Organization (QIO)..."**. My question is how does one go about becoming a QIO? The Centers for Medicare and Medicaid Services (CMS) reviews applications from prospective QIO-like organizations to determine whether the organization meets the requirements in section 1152 of the Social Security Act and Code of Federal Regulations, Title 42, Part 475. Additional information can be found at the following web address:
https://www.cms.gov/QualityImprovementOrgs/03_HowtoBecomeaQIO.asp#TopOfPage
2. **List of Items, Schedule of Requirements, Scope of Work, Terms of Reference, Bill of Materials required.** Please refer to the Statement of Work.
3. **Soft Copy of the Tender Document through email.** The RFP can be accessed through the following web address: <http://new.dhh.louisiana.gov/index.cfm/newsroom/detail/2222>
<http://wwwprd.doa.louisiana.gov/osp/lapac/bidlist.asp?department=4>
4. **Names of countries that will be eligible to participate in this tender.** The successful proposer must have a facility or building located in Baton Rouge, Louisiana, as part of its performance under the contract.
5. **Information about the Tendering Procedure and Guidelines** It is unclear what "tendering procedure and guidelines" are referenced here.
6. **Estimated Budget for this Purchase** It is not clear what "purchase" is referenced here.
7. **Any Extension of Bidding Deadline?** Yes, the schedule of events has been revised.
8. **Any Addendum or Pre Bid meeting Minutes?** Not applicable
9. **Please define non-waiver case management agencies providing home and community based services** Non-waiver case management includes services provided to recipients participating in the EPSDT program, HIV program, Nurse Family Partnership, EarlySteps, Office of Behavioral Health programs, and through private contracts.
10. **Please define case management agencies providing home and community based services** This includes agencies providing case management services to recipients participating in waiver programs and other targeted programs, such as EPSDT and EarlySteps.
11. **Is monitoring of HCBS recipients excluded from this RFP?** No, the successful proposer will be responsible for conducting a 5% monitoring of EPSDT recipients linked to support coordination agencies and for recipient monitoring related to complaint investigations.
12. **The number of APS cases HHS received in FY 07/08 = 392; 08/09 = 513 and 09/10 = 585. Are these numbers a subset of the complaint volumes in the respective years or are they in addition to the complaint volumes in the respective years?** APS cases were

included as a subset of the total volume of complaints tallied per year. All complaints are entered into a database, regardless of whether action is taken on them.

13. **Will the Department provide historical data on the average number of new license applications received annually?** For FY 08/09, no initial license applications were received; for FY 09/10, 16 initial license applications were received, for FY 10/11, 35 initial license applications were received, for FY 11/12, 14 initial license applications have been received as of 9/8/11. Due to the past moratorium and facility need review procedures, the number of applications have decreased.
14. **It is anticipated that the number of licensed providers will decrease from over 1,636 to approximately 900 providers as the Department continues the implementation of Act 839 (HB1098) to consolidate and incorporate a single license for HCBS providers. Please give a timeline for the decrease in providers from 1,636 to approximately 900.** It is anticipated take approximately 10 to 13 months to consolidate and incorporate a single license for HCBS providers.
15. **Will the Department provide historical data on the numbers of appeals or legal action resulting from an adverse action taken based on recommendations and/or documentation?** This information is not readily available.
16. **Cost and Pricing Analysis, subsection "a" states, *an item by item breakdown of costs for each task should be included in the proposal*". The template (Attachment V) appears to have cost broken down item by item for each year for administrative cost only. It only shows totals for initial licensing, total licensing, complaint investigation and provider monitoring. Please give more detail on how this form is to be completed.** All administrative costs, such as salaries, office supplies, operating costs, should be included for each year of the contract, with a total added in the "total administrative cost" row. The cost for each major task, initial licensing, licensing, complaint investigations, provider monitoring, EPSDT monitoring, and systems for reporting/reports, should be separated from administrative cost and include a fee per task and total for each year of the contract. There should be two totals for each year of the contract – one for administrative cost and one for programmatic cost.
17. **Should "TOTAL" lines be added for EPSDT Monitoring and Systems for Reporting/Reports? Should there be a Per EPSDT Monitoring Fee?** An additional line has been added for the EPSDT monitoring fee and systems for reporting/reports costs.
18. **Should Systems for Reporting/Reporting cost be included in Administrative cost?** No, see the response to #17 above.